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Date of Deposit: February 9, 2006

IAP7 Rec'd PCT/PTO 09 FEB 2006

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| TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A SUBMISSION UNDER 35 U.S.C. 371 | | ATTORNEY DOCKET NO. 11371-93 Siemens AG Ref. No. 2003P06492WOUS U.S. APPLICATION NO. (unknown, see 37 C.F.R. 1.5) Not yet assigned |
| INTERNATIONAL APPLICATION NO. PCT/EP2004/008163 | INTERNATIONAL FILING DATE July 21, 2004 | PRIORITY DATE CLAIMED August 11, 2003 |
| TITLE OF INVENTION RADIO NETWORK FOR PROTECTING ELECTRONIC DEVICES FROM ELECTROMAGNETIC RADIATION OF A MOBILE STATION | | |
| APPLICANTS FOR DO/EO/US Bernhard VOGEL and Matthias WEDEL | | |
| Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information: | | |
| <ol style="list-style-type: none">1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a filing under 35 U.S.C. 3712. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 3713. <input checked="" type="checkbox"/> This express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9), and (21) indicated below.4. <input type="checkbox"/> The US has been elected (Article 31).5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2)).<ol style="list-style-type: none">a. <input type="checkbox"/> is transmitted herewith (required only if not transmitted by the International Bureau).b. <input checked="" type="checkbox"/> has been transmitted by the International Bureau.c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US).6. <input checked="" type="checkbox"/> An English translation of the International Application into English (35 U.S.C. 371(c)(2)).<ol style="list-style-type: none">a. <input checked="" type="checkbox"/> is attached hereto.b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4).7. <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3)).<ol style="list-style-type: none">a. <input type="checkbox"/> are transmitted herewith (required only if not transmitted by the International Bureau).b. <input type="checkbox"/> have been transmitted by the International Bureau.c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired.d. <input type="checkbox"/> have not been made and will not be made.8. <input type="checkbox"/> An English translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).9. <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)).10. <input checked="" type="checkbox"/> An English translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)) and/or amendments under Article 34. | | |
| Items 11 to 20 Below concern other document(s) or information included: | | |
| <ol style="list-style-type: none">11. <input checked="" type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98.12. <input checked="" type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.13. <input checked="" type="checkbox"/> A preliminary amendment.14. <input type="checkbox"/> An Application Data Sheet under 37 CFR 1.76.15. <input checked="" type="checkbox"/> A substitute specification.16. <input checked="" type="checkbox"/> A power of attorney and/or change of address letter.17. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821-1.825.18. <input checked="" type="checkbox"/> A second copy of the published international application under 35 U.S.C. 154(d)(4).19. <input checked="" type="checkbox"/> A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).20. <input checked="" type="checkbox"/> Other items or information: Return Post card. | | |

SEND COMPLETED FORM TO: Mail Stop PCT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

IAP20 Rec'd PCT/PTO-09 FEB 2006

| U.S. APPLICATION NO. (If known, See 37 CFR 1.50) 10/268175 | | INTERNATIONAL APPLICATION NO. | | ATTORNEY'S DOCKET NO. 11371-93 | | | | | | | | | | | | | | | | | | | | | |
|--|--------------|-------------------------------|-------------|--|--------------|--------------|--------------|--------------|-----------|-------|------------|--------------------|-------|--------|-------------|---|--|--|------------|-------------------------------|--|--|----|--|--|
| The following fees are submitted: 21. <input checked="" type="checkbox"/> Basic national fee (37 CFR 1.492(a))\$300 22. <input checked="" type="checkbox"/> Examination fee (37 CFR 1.492(c)) If International preliminary report prepared by ISA/US or the examination report prepared by IPEA/US indicates all claims satisfy provisions of PCT Article 33(1)-(4)\$0 All other situations\$200 23. <input checked="" type="checkbox"/> Search Fee (37 CFR 1.492(b)) If the written opinion of the ISA/US or the International preliminary examination report prepared by IPEA/US indicates all claims satisfy provisions of PCT Article 33(1)-(4)\$0 Search fee (37 CFR 1.445(a)(2)) has been paid on the international application to the USPTO as an International Searching Authority\$100 International Search Report prepared and provided to the Office\$400 All other situations\$500 <div style="text-align: right;"> TOTAL OF 21, 22 and 23 = \$1,000 </div> <input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof. | | | | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">CALCULATIONS</th> <th style="width:50%;">PTO USE ONLY</th> </tr> <tr> <td style="text-align: center;">\$300</td> <td></td> </tr> <tr> <td style="text-align: center;">\$200</td> <td></td> </tr> <tr> <td style="text-align: center;">\$400</td> <td></td> </tr> <tr> <td style="text-align: center;">\$ n/a</td> <td></td> </tr> </table> | | CALCULATIONS | PTO USE ONLY | \$300 | | \$200 | | \$400 | | \$ n/a | | | | | | | | | | | |
| CALCULATIONS | PTO USE ONLY | | | | | | | | | | | | | | | | | | | | | | | | |
| \$300 | | | | | | | | | | | | | | | | | | | | | | | | | |
| \$200 | | | | | | | | | | | | | | | | | | | | | | | | | |
| \$400 | | | | | | | | | | | | | | | | | | | | | | | | | |
| \$ n/a | | | | | | | | | | | | | | | | | | | | | | | | | |
| Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(e)). | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:25%;">Claims</th> <th style="width:25%;">Number Filed</th> <th style="width:25%;">Number Extra</th> <th style="width:25%;">Rate</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td style="text-align: center;">10 - 20 =</td> <td style="text-align: center;">0</td> <td style="text-align: center;">x \$ 50.00</td> </tr> <tr> <td>Independent Claims</td> <td style="text-align: center;">- 3 =</td> <td></td> <td style="text-align: center;">x \$ 200.00</td> </tr> <tr> <td>Multiple dependent claim(s) if Applicable</td> <td></td> <td></td> <td style="text-align: center;">+ \$360.00</td> </tr> <tr> <td colspan="3" style="text-align: right;">TOTAL OF ABOVE CALCULATIONS =</td> <td style="text-align: center;">\$</td> </tr> </tbody> </table> | | | | Claims | Number Filed | Number Extra | Rate | Total Claims | 10 - 20 = | 0 | x \$ 50.00 | Independent Claims | - 3 = | | x \$ 200.00 | Multiple dependent claim(s) if Applicable | | | + \$360.00 | TOTAL OF ABOVE CALCULATIONS = | | | \$ | | |
| Claims | Number Filed | Number Extra | Rate | | | | | | | | | | | | | | | | | | | | | | |
| Total Claims | 10 - 20 = | 0 | x \$ 50.00 | | | | | | | | | | | | | | | | | | | | | | |
| Independent Claims | - 3 = | | x \$ 200.00 | | | | | | | | | | | | | | | | | | | | | | |
| Multiple dependent claim(s) if Applicable | | | + \$360.00 | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL OF ABOVE CALCULATIONS = | | | \$ | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2. | | | | | | | | | | | | | | | | | | | | | | | | | |
| Processing fee of \$130.00 for furnishing the English translation later than the <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)). | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31), \$40.00 per property + | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL NATIONAL FEE= | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL FEES ENCLOSED= | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | Amount to be refunded \$ | | | | | | | | | | | | | | | | | | | | | |
| | | | | charged \$ | | | | | | | | | | | | | | | | | | | | | |
| a. <input type="checkbox"/> A check in the amount of \$ to cover the above fees, and a check for \$ for assignment recordal are enclosed. b. <input checked="" type="checkbox"/> Please charge my Deposit Account No. 23-1925 in the amount of \$1,040 to cover the above fees. A duplicate copy of this sheet is enclosed. c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 23-1925. A duplicate copy of this sheet is enclosed. d. <input type="checkbox"/> Fees are to be charged to a credit card. | | | | | | | | | | | | | | | | | | | | | | | | | |
| NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status. | | | | | | | | | | | | | | | | | | | | | | | | | |
| Send All Correspondence to: Brinks Hofer Gilson & Lione P.O. Box 10395 Chicago, IL 60610 | | | | <div style="text-align: center;"> Signature Craig A. Summerfield Name 37,947 Registration Number </div> | | | | | | | | | | | | | | | | | | | | | |